

Fill in this information to identify your case:

Debtor 1 **Hasham R. Syed**  
First Name Middle Name Last Name

Debtor 2 **Nighat A. Syed**  
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY, NEWARK DIVISION

Case number **22-17137**  
(if known)

☒ Check if this is an amended filing

## Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

#### Part 1: Summarize Your Assets

		Your assets Value of what you own
1. <b>Schedule A/B: Property</b> (Official Form 106A/B)		
1a. Copy line 55, Total real estate, from Schedule A/B.....	\$	<b>950,000.00</b>
1b. Copy line 62, Total personal property, from Schedule A/B.....	\$	<b>13,058.59</b>
1c. Copy line 63, Total of all property on Schedule A/B.....	\$	<b>963,058.59</b>

#### Part 2: Summarize Your Liabilities

		Your liabilities Amount you owe
2. <b>Schedule D: Creditors Who Have Claims Secured by Property</b> (Official Form 106D)		
2a. Copy the total you listed in Column A Amount of claim, at the bottom of the last page of Part 1 of Schedule D...	\$	<b>878,199.99</b>
3. <b>Schedule E/F: Creditors Who Have Unsecured Claims</b> (Official Form 106E/F)		
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F.....	\$	<b>53,011.47</b>
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F.....	\$	<b>1,332,563.61</b>
<b>Your total liabilities</b>		<b>\$ 2,263,775.07</b>

#### Part 3: Summarize Your Income and Expenses

4. <b>Schedule I: Your Income</b> (Official Form 106I)		
Copy your combined monthly income from line 12 of Schedule I.....	\$	<b>10,100.00</b>
5. <b>Schedule J: Your Expenses</b> (Official Form 106J)		
Copy your monthly expenses from line 22c of Schedule J.....	\$	<b>9,645.94</b>

#### Part 4: Answer These Questions for Administrative and Statistical Records

6. **Are you filing for bankruptcy under Chapters 7, 11, or 13?**
- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- ☒ Yes
7. **What kind of debt do you have?**
- ☒ **Your debts are primarily consumer debts.** Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

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8. **From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ **1,683.33**

9. **Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:**

	Total claim
<b>From Part 4 on Schedule E/F, copy the following:</b>	
9a. Domestic support obligations (Copy line 6a.)	\$ <b>0.00</b>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ <b>53,011.47</b>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ <b>0.00</b>
9d. Student loans. (Copy line 6f.)	\$ <b>0.00</b>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ <b>0.00</b>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$ <b>0.00</b>
9g. <b>Total.</b> Add lines 9a through 9f.	\$ <b>53,011.47</b>

**Fill in this information to identify your case:**

Debtor 1 Hasham R. Syed  
First Name Middle Name Last Name

Debtor 2 Nighat A. Syed  
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY, NEWARK DIVISION

Case number 22-17137  
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Official Form 106E/F

**Schedule E/F: Creditors Who Have Unsecured Claims**

**12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

**Part 1: List All of Your PRIORITY Unsecured Claims**

**1. Do any creditors have priority unsecured claims against you?**

☐ No. Go to Part 2.

☒ Yes.

**2. List all of your priority unsecured claims.** If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

		Total claim	Priority amount	Nonpriority amount	
2.1	<b>IRS - Centralized Insolvency Operations</b> Priority Creditor's Name  <b>PO Box 7346</b> <b>Philadelphia, PA 19101-7346</b> <small>Number Street City State Zip Code</small>  <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____  When was the debt incurred? _____  <b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of PRIORITY unsecured claim:</b> <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____ <b>2021 Tax Debt</b>	<b>\$7,834.00</b>	<b>\$0.00</b>	<b>\$7,834.00</b>

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2.2	<b>IRS - Centralized Insolvency Operations</b> Priority Creditor's Name  <b>PO Box 7346</b> <b>Philadelphia, PA 19101-7346</b> Number Street City State Zip Code  <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____  <b>When was the debt incurred?</b> _____  <b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of PRIORITY unsecured claim:</b> <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____	_____ <b>\$7,834.00</b> _____ <b>\$7,834.00</b> _____ <b>\$0.00</b>
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**2020 Tax Debt**

2.3	<b>IRS-Centralized Insolvency Operations</b> Priority Creditor's Name  <b>PO Box 7346</b> <b>Philadelphia, PA 19101-7346</b> Number Street City State Zip Code  <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____  <b>When was the debt incurred?</b> _____  <b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of PRIORITY unsecured claim:</b> <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____	_____ <b>\$36,455.47</b> _____ <b>\$36,455.47</b> _____ <b>\$0.00</b>
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**2019 Taxes Owed**

2.4	<b>State of New Jersey</b> Priority Creditor's Name <b>Division of Taxation Compliance Activity</b> <b>PO Box 245</b> <b>Trenton, NJ 08695-0245</b> Number Street City State Zip Code  <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____  <b>When was the debt incurred?</b> _____  <b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of PRIORITY unsecured claim:</b> <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____	_____ <b>\$888.00</b> _____ <b>\$888.00</b> _____ <b>\$0.00</b>
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**2021 NJ State Taxes Owed**

**Part 2: List All of Your NONPRIORITY Unsecured Claims**

Debtor 1  
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**3. Do any creditors have nonpriority unsecured claims against you?**

☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.

☒ Yes.

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.** If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

		Total claim
<b>4.1</b> <b>Ally Financial</b> Nonpriority Creditor's Name  <b>PO Box 380902</b> <b>Bloomington, MN 55438-0902</b> Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> <u>4892</u>  <b>When was the debt incurred?</b> _____  <b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Charged off Debt-Vehicle lease 2021 McLaren</u>	<b>\$16,234.82</b>

<b>4.2</b> <b>American Express</b> Nonpriority Creditor's Name  <b>PO Box 981537</b> <b>El Paso, TX 79998-1537</b> Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> <u>1003</u>  <b>When was the debt incurred?</b> _____  <b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Debt</u>	<b>\$8,442.30</b>
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4.3 **Amzad Mursalim aka Zara Stitching LLC**  
Nonpriority Creditor's Name

**245 4th St Bldg 2ND**  
**Passaic, NJ 07055-7813**  
Number Street City State Zip Code

**Who incurred the debt?** Check one.

☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

**Is the claim subject to offset?**

☒ No  
☐ Yes

Last 4 digits of account number \_\_\_\_\_ **\$250,000.00**

**When was the debt incurred?** \_\_\_\_\_

**As of the date you file, the claim is:** Check all that apply

☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Lien on House**

4.4 **Apple Card-GS Bank USA**  
Nonpriority Creditor's Name

**PO Box 7247**  
**Philadelphia, PA 19170-0001**  
Number Street City State Zip Code

**Who incurred the debt?** Check one.

☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

**Is the claim subject to offset?**

☒ No  
☐ Yes

Last 4 digits of account number \_\_\_\_\_ **\$1,710.00**

**When was the debt incurred?** \_\_\_\_\_

**As of the date you file, the claim is:** Check all that apply

☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Credit Debt**

4.5 **Bennett Wain c/oChristpher Musmanno, Esq**  
Nonpriority Creditor's Name

**165 E Main St**  
**Denville, NJ 07834-2618**  
Number Street City State Zip Code

**Who incurred the debt?** Check one.

☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☒ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

**Is the claim subject to offset?**

☒ No  
☐ Yes

Last 4 digits of account number **0222** **unknown**

**When was the debt incurred?** \_\_\_\_\_

**As of the date you file, the claim is:** Check all that apply

☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Civil Lawsuit**

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4.6	<b>BMW Financial Services</b> Nonpriority Creditor's Name  <b>5550 Britton Pkwy</b> <b>Hilliard, OH 43026-7456</b> Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____  When was the debt incurred? _____  As of the date you file, the claim is: Check all that apply  <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u><b>Auto Lease-co signed on Son's Lease</b></u>	<b>\$13,880.00</b>
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4.7	<b>CBNA/Best Buy</b> Nonpriority Creditor's Name  <b>PO Box 6497</b> <b>Sioux Falls, SD 57117-6497</b> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u><b>6938</b></u>  When was the debt incurred? _____  As of the date you file, the claim is: Check all that apply  <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u><b>Credit Debt</b></u>	<b>\$3,763.00</b>
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4.8	<b>Citi Cards/Citibank</b> Nonpriority Creditor's Name  <b>PO Box 6241</b> <b>Sioux Falls, SD 57117-6241</b> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u><b>2418</b></u>  When was the debt incurred? _____  As of the date you file, the claim is: Check all that apply  <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u><b>Credit Debt</b></u>	<b>\$4,051.00</b>
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4.9	<b>Citibank NA</b> Nonpriority Creditor's Name  <b>PO Box 6181</b> <b>Sioux Falls, SD 57117-6181</b> Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>3068</b> <b>When was the debt incurred?</b>  <b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Collection Debt-original Creditor Citibank</b>	<b>\$2,217.27</b>
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4.10	<b>Citibank NA/Costco</b> Nonpriority Creditor's Name  <b>PO Box 9001037</b> <b>Louisville, KY 40290-1037</b> Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>0039</b> <b>When was the debt incurred?</b>  <b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Debt</b>	<b>\$18,463.00</b>
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4.11	<b>CL 45 MW Loan</b> Nonpriority Creditor's Name <b>c/o Saldutti Law Group</b> <b>800 Kings Hwy N Ste 300</b> <b>Cherry Hill, NJ 08034-1511</b> Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>7420</b> <b>When was the debt incurred?</b>  <b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Judgment</b>	<b>\$822,438.62</b>
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<div>4.12</div> <div><b>CMRE Financial Services Inc.</b> Nonpriority Creditor's Name</div> <div><b>PO Box 54028</b> <b>Los Angeles, CA 90054-0028</b> Number Street City State Zip Code</div> <div>Who incurred the debt? Check one.</div> <div><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</div>	<div>Last 4 digits of account number <b>0295</b> <b>\$2,861.25</b></div> <div>When was the debt incurred? _____</div> <div>As of the date you file, the claim is: Check all that apply</div> <div><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</div> <div>Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Medical Debt-original creditor Atlantic Ambulance</b></div>
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<div>4.13</div> <div><b>Comenity Bank/BJ's Club</b> Nonpriority Creditor's Name</div> <div><b>PO Box 182120</b> <b>Columbus, OH 43218-2120</b> Number Street City State Zip Code</div> <div>Who incurred the debt? Check one.</div> <div><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</div>	<div>Last 4 digits of account number <b>5878</b> <b>\$8,527.00</b></div> <div>When was the debt incurred? _____</div> <div>As of the date you file, the claim is: Check all that apply</div> <div><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</div> <div>Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Debt</b></div>
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<div>4.14</div> <div><b>Credit One Bank</b> Nonpriority Creditor's Name</div> <div><b>PO Box 98872</b> <b>Las Vegas, NV 89193-8872</b> Number Street City State Zip Code</div> <div>Who incurred the debt? Check one.</div> <div><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</div>	<div>Last 4 digits of account number <b>4796</b> <b>\$616.00</b></div> <div>When was the debt incurred? _____</div> <div>As of the date you file, the claim is: Check all that apply</div> <div><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</div> <div>Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Collection Debt</b></div>
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Debtor 1  
Debtor 2 **Syed, Hasham R. & Syed, Nighat A.**

Case number (if known) **22-17137**

4.15

**First Business Specialty Finance LLC**

Nonpriority Creditor's Name  
**c/o Josh Kopp, Esq.**  
**10 E Doty St Ste 900**  
**Madison, WI 53703-3390**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☒ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
- ☐ Yes

Last 4 digits of account number **2641**

**\$29,302.28**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Business Lawsuit**

4.16

**Home Depot**

Nonpriority Creditor's Name

**PO Box 105555**  
**Atlanta, GA 30348-5555**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☒ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
- ☐ Yes

Last 4 digits of account number **4931**

**\$3,542.96**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Credit Debt**

4.17

**JP Morgan Chase Bank**

Nonpriority Creditor's Name

**PO Box 182055**  
**Columbus, OH 43218-2055**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☒ At least one of the debtors and another
- ☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
- ☐ Yes

Last 4 digits of account number **4709**

**\$85,945.00**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Auto Loan-Co Debtor co signed on Son's loan for 2020 Land R Range Rover**

Debtor 1  
Debtor 2 **Syed, Hasham R. & Syed, Nighat A.**

Case number (if known) **22-17137**

4.18	<b>McNeese Wallace &amp; Nurick LLC</b> <small>Nonpriority Creditor's Name</small>	<b>Last 4 digits of account number</b>	<b>\$0.00</b>
	<b>100 Pine St</b> <b>Harrisburg, PA 17101-1200</b> <small>Number Street City State Zip Code</small>	<b>When was the debt incurred?</b>	
	<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u><b>Lease Default</b></u>	

4.19	<b>Mercantile Adjustment Bureau LLC</b> <small>Nonpriority Creditor's Name</small>	<b>Last 4 digits of account number</b> <b>8B02</b>	<b>\$28,019.96</b>
	<b>165 Lawrence Bell Dr Ste 100</b> <b>Williamsville, NY 14221-7900</b> <small>Number Street City State Zip Code</small>	<b>When was the debt incurred?</b>	
	<b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u><b>Collection Debt-original Creditor Bank of America</b></u>	

4.20	<b>Mercedes Benz Financial Services LLC</b> <small>Nonpriority Creditor's Name</small>	<b>Last 4 digits of account number</b> <b>9001</b>	<b>\$11,304.65</b>
	<b>PO Box 685</b> <b>Roanoke, TX 76262-0685</b> <small>Number Street City State Zip Code</small>	<b>When was the debt incurred?</b>	
	<b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u><b>Auto Lease Involuntary Repossession vehicle-2021 Mercedes Benz</b></u>	

Debtor 1  
Debtor 2 **Syed, Hasham R. & Syed, Nighat A.**

Case number (if known) **22-17137**

4.21	<b>PRL USA Holdings</b> Nonpriority Creditor's Name <b>c/o Blakely Law Group</b> <b>1334 Park View Ave Ste 280</b> <b>Manhattan Beach, CA 90266-3752</b> Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> <u><b>0201</b></u> <span style="float: right;"><b>unknown</b></span> <b>When was the debt incurred?</b> _____  <b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____
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4.22	<b>Provident Bank</b> Nonpriority Creditor's Name <b>PO Box 1001</b> <b>Iselin, NJ 08830-1001</b> Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> <u><b>1175</b></u> <span style="float: right;"><b>\$413.42</b></span> <b>When was the debt incurred?</b> _____  <b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u><b>Credit Debt</b></u>
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4.23	<b>Resurgent Capital Services</b> Nonpriority Creditor's Name <b>PO Box 1269</b> <b>Greenville, SC 29602-1269</b> Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> <u><b>8220</b></u> <span style="float: right;"><b>\$616.38</b></span> <b>When was the debt incurred?</b> _____  <b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u><b>Collection Debt-Original Creditor Credit One Bank</b></u>
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Debtor 1  
Debtor 2 **Syed, Hasham R. & Syed, Nighat A.**

Case number (if known) **22-17137**

4.24	<b>Sears</b> Nonpriority Creditor's Name <b>c/o Fein Such Kahn &amp; Shepard</b> <b>7 Century Dr Ste 201</b> <b>Parsippany, NJ 07054-4609</b> Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>4920</b> <b>When was the debt incurred?</b>  <b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Application for Wage Execution</b>	<b>\$7,500.00</b>
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4.25	<b>St. Clare's Health</b> Nonpriority Creditor's Name <b>25 Pocono Rd</b> <b>Denville, NJ 07834-2954</b> Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>7996</b> <b>When was the debt incurred?</b>  <b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Medical Debt</b>	<b>\$4,374.60</b>
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4.26	<b>Synchrony Bank/VENMO</b> Nonpriority Creditor's Name <b>PO Box 960061</b> <b>Orlando, FL 32896-0061</b> Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>0899</b> <b>When was the debt incurred?</b>  <b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Debt</b>	<b>\$562.92</b>
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Debtor 1  
Debtor 2 **Syed, Hasham R. & Syed, Nighat A.**

Case number (if known) **22-17137**

4.27	<b>TBOM ATLS Fortiva THD</b> Nonpriority Creditor's Name  <b>PO Box 10555</b> <b>Atlanta, GA 30310-0555</b> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>7676</b>  When was the debt incurred? _____  As of the date you file, the claim is: Check all that apply  <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Charged off Account</b>	<b>\$3,542.00</b>
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4.28	<b>Todd Cushner &amp; Associates</b> Nonpriority Creditor's Name  <b>399 Knollwood Rd Ste 205</b> <b>White Plains, NY 10603-1916</b> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>1064</b>  When was the debt incurred? _____  As of the date you file, the claim is: Check all that apply  <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Business Debt</b>	<b>\$2,261.66</b>
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4.29	<b>Verizon</b> Nonpriority Creditor's Name  <b>PO Box 408</b> <b>Newark, NJ 07101-0408</b> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>0001</b>  When was the debt incurred? _____  As of the date you file, the claim is: Check all that apply  <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Utility Debt</b>	<b>\$1,973.52</b>
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**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Debtor 1  
Debtor 2 **Syed, Hasham R. & Syed, Nighat A.**

Case number (if known) **22-17137**

Name and Address  
**Black to Green LLC**  
**50 Hilton St**  
**Easton, PA 18042-7391**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.18** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address  
**Celentano Stadmauer & Walentowicz LLP**  
**1035 US Highway 46 Ste B208**  
**Clifton, NJ 07013-2469**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.25** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**7996**

Name and Address  
**Credit Control LLC**  
**3300 Rider Trl S Ste 500**  
**Earth City, MO 63045-1338**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.26** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**0899**

Name and Address  
**Credit One Bank**  
**PO Box 98872**  
**Las Vegas, NV 89193-8872**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.23** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**8220**

Name and Address  
**Fein Such Kahn & Shepard, PC**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.24** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**4920**

Name and Address  
**LVNV Funding LLC**  
**PO Box 10497**  
**Greenville, SC 29603-0497**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.24** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**4920**

Name and Address  
**LVNV Funding LLC**  
**PO Box 98875**  
**Las Vegas, NV 89193-8875**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.14** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**4796**

Name and Address  
**Saldutti Law Group**  
**800 Kings Hwy N Ste 300**  
**Cherry Hill, NJ 08034-1511**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.11** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**7420**

Name and Address  
**Synergetic Communication, Inc.**  
**5450 NW Central Dr Ste 220**  
**Houston, TX 77092-2061**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.9** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**3068**

Name and Address  
**United Collection Bureau**  
**5620 Southwyck Blvd Ste 206**  
**Toledo, OH 43614-1501**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.10** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**0039**

Name and Address  
**Velocity Investments, LLC**  
**222 N La Salle St**  
**Chicago, IL 60601-1003**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.9** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**3068**

Debtor 1  
Debtor 2 **Syed, Hasham R. & Syed, Nighat A.**

Case number (if known) **22-17137**

**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

<b>Total claims from Part 1</b>	6a. Domestic support obligations	6a.	\$	<b>0.00</b>
	6b. Taxes and certain other debts you owe the government	6b.	\$	<b>53,011.47</b>
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$	<b>0.00</b>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	<b>0.00</b>
	6e. Total Priority. Add lines 6a through 6d.	6e.	\$	<b>53,011.47</b>

  

<b>Total claims from Part 2</b>	6f. Student loans	6f.	\$	<b>0.00</b>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	<b>0.00</b>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	<b>0.00</b>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	<b>1,332,563.61</b>
	6j. Total Nonpriority. Add lines 6f through 6i.	6j.	\$	<b>1,332,563.61</b>



**Fill in this information to identify your case:**

Debtor 1 Hasham R. Syed  
First Name Middle Name Last Name

Debtor 2 Nighat A. Syed  
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY, NEWARK DIVISION

Case number 22-17137  
(if known)

☐ Check if this is an amended filing

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**Sign Below**

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person \_\_\_\_\_ Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Hashim R. Syed

**Hasham R. Syed**

Signature of Debtor 1

Date November 21, 2022

X /s/ Nighat Seyed

**Nighat A. Syed**

Signature of Debtor 2

Date November 21, 2022